

Corrected Copy

| <b>ACORD. CERTIFICATE OF INSURANCE</b>  |   |   |   | <small>ISSUE DATE (MM/DD/YY)</small><br><div style="border: 1px solid black; display: inline-block; padding: 2px;">12/29/94</div> |  |
|---|---|---|---|---|--|
| <b>PRODUCER</b><br><br>Meeker Sharkey & MacBean<br>21 Commerce Drive<br>Cranford, NJ 07016<br><br>908-272-8100  |   | THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. |   |   |  |
| <b>COMPANIES AFFORDING COVERAGE</b>   |   |   |   |   |  |
| <b>INSURED</b><br><br>Soc. Hill @ University Hts. III<br>1 Cornerstone Lane<br>Newark<br><br>NJ 07103   |   | COMPANY LETTER <b>A</b> St. Paul Fire & Marine  |   |   |  |
|   |   | COMPANY LETTER <b>B</b>   |   |   |  |
|   |   | COMPANY LETTER <b>C</b>   |   |   |  |
|   |   | COMPANY LETTER <b>D</b>   |   |   |  |
|   |   | COMPANY LETTER <b>E</b>   |   |   |  |
| <b>COVERAGES</b><br>THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. |   |   |   |   |  |
| <small>CO LTR</small>   | <b>TYPE OF INSURANCE</b>  | <b>POLICY NUMBER</b>  | <b>POLICY EFFECTIVE DATE (MM/DD/YY)</b>   | <b>POLICY EXPIRATION DATE (MM/DD/YY)</b>  | <b>LIMITS</b>                              |
| <b>A</b>  | <b>GENERAL LIABILITY</b><br><input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR.<br><input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT.  | BC02900238  | 1/01/95   | 1/01/96   | GENERAL AGGREGATE      \$ 5000000          |
|   |   |   |   |   | PRODUCTS-COMP/OP AGG.      \$ 5000000      |
|   |   |   |   |   | PERSONAL & ADV. INJURY      \$ 5000000     |
|   |   |   |   |   | EACH OCCURRENCE      \$ 5000000            |
|   |   |   |   |   | FIRE DAMAGE (Any one fire)      \$ 50000   |
|   |   |   |   |   | MED. EXPENSE (Any one person)      \$ 5000 |
| <b>A</b>  | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS<br><input type="checkbox"/> GARAGE LIABILITY |   |   |   | COMBINED SINGLE LIMIT      \$              |
|   |   |   |   |   | BODILY INJURY (Per person)      \$         |
|   |   |   |   |   | BODILY INJURY (Per accident)      \$       |
|   |   |   |   |   | PROPERTY DAMAGE      \$                    |
|   |   |   |   |   | EACH OCCURRENCE      \$                    |
|   |   |   |   |   | AGGREGATE      \$                          |
| <b>A</b>  | <b>EXCESS LIABILITY</b><br><input type="checkbox"/> UMBRELLA FORM<br><input type="checkbox"/> OTHER THAN UMBRELLA FORM  |   |   |   | STATUTORY LIMITS                           |
|   |   |   |   |   | EACH ACCIDENT      \$                      |
|   |   |   |   |   | DISEASE-POLICY LIMIT      \$               |
|   |   |   |   |   | DISEASE-EACH EMPLOYEE      \$              |
|   |   |   |   |   |  |
|   |   |   |   |   |  |
| <b>A</b><br><b>A</b>  | <b>WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY</b>   |   |   |   | \$21,775,000.                              |
|   | <b>OTHER</b><br>Bldg. Bldgs & Cnts<br>Fidelity  |   |   |   | BC02900238<br>BC02900238                   |
| <b>DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS</b><br>OWNER: JERRY COGMAN, (UNMARRIED) AND ANN MARIE ARNOLD (UNMARRIED)<br>LOC: 258 MATTHEWS DRIVE, NEWARK, NJ 07103 (32E1) LOT: 32.09 BLOCK: 406  |   |   |   |   |  |
| <b>CERTIFICATE HOLDER</b><br><br>COUNTY MORTGAGE COMPANY, INC. AND/OR ITS ASSIGNS<br>33 CLINTON ROAD<br>WEST CALDWELL, NJ 07006   |   |   | <b>CANCELLATION</b><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES. |   |  |
|   |   |   | AUTHORIZED REPRESENTATIVE<br><br><div style="text-align: right;">010036000</div>  |   |  |
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